



**Design Professional's
Residential Water Quality Certificate**

Permit # _____

Site Address: _____

Tax Parcel ID: _____

Project Name: _____

I, _____, a design professional registered in the State of Georgia, hereby certify with my signature and seal, that the water quality features installed for the above referenced project, have been adequately installed, and are functioning per design, as shown on the City of Brookhaven's approved set of construction drawings.

Signed this, the _____ day of _____, 20_____.

Signature

Georgia Registration Number

Affix Seal